

01/15/2004 17:04 FAX 7172375300

McNees Wallace & Nurick

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Complete and send this form, together with applicable fee(s), to: Mail

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Commissioner for Patents
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06111 7590 12/15/2003

GENERAL ELECTRIC COMPANY
ANDREW C HESS
GE AIRCRAFT ENGINES
ONE NEUMANN WAY M/D H17
CINCINNATI, OH 452156301

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Lindsay Vican

(Depositor's name)

Lindsay Vican

(Signature)

January 15, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/071,129	02/08/2002	Theodore Robert Grossman	13DV13990	1496

TITLE OF INVENTION: METHOD FOR PREVENTING THE FORMATION OF SECONDARY REACTION ZONE IN SUSCEPTIBLE ARTICLES, AND ARTICLES PREPARED BY THE METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	03/15/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
EDMONDSON, LYNNE RENEE	1725	228-193000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Dr. Gregory O. Garmong

2Carmen Santa Maria

McNees Wallace & Nurick LLC

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

General Electric Company

Schenectady, NY

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 5

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(Authorized Signature)

(Date)

Carmen Santa Maria

01/15/04

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01 FC:1501	1330.00 DA
02 FC:1504	300.00 DA
03 FC:8001	15.00 DA

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PTOL-85 (Rev. 10/03) Approved for use through 04/30/2004

OMB 0451-0022

PAGE 5/6 * RCVD AT 1/15/2004 5:07:36 PM [Eastern Standard Time] * SVR:USPTO-EFXXR/2/1 * DNIS:7464000 * CSID:7172375300 * DURATION (mm:ss):03:50



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McNees Wallace & Nurick

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McNees Wallace & Nurick LLC
attorneys at law

Routing #391
Client #21635-0043

FAX COVER LETTER

DATE: January 15, 2004

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FROM: Carmen Santa Maria Direct Dial: (717) 237-5226

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PTO/SB/97 (05-03)

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Transmittal Form
Issue Fee Transmittal

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PTO/SB/17 (01-03)

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**FEE TRANSMITTAL
for FY 2003**

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 1645**Complete If Known**

Application Number	10/071.129
Filing Date	02/08/2002
First Named Inventor	GROSSMAN et al.
Examiner Name	Lynne Renee Edmondson
Group / Art Unit	1725
Attorney Docket No.	13DV-13990/11719 (21635-0043)

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit AccountDeposit
Account
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Account
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McNees Wallace & Nurick LLC

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☒ Charge fee(s) indicated below ☒ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	180	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$ 0)

2. EXTRA CLAIM FEES

			Extra Claims		Fee from below		Fee Paid
Total Claims		-20**	=	0	X		= 0
Independent Claims		-3**	=	0	X		= 0
Multiple Dependent					X		= 0

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$ 0)

**or number previously paid, if greater, For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	85	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	820*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,870	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	850	Utility issue fee (or release)	1330
1502	470	2502	235	Design issue fee	
1503	830	2503	315	Plant issue fee	
1450	130	1450	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17 (a)	
1808	180	1808	180	Submission of Information Disclosure Sheet	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1901	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) Publication Fee & Advance Order of Patent Copies

315

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 1645)

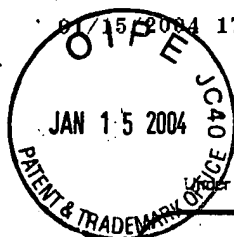
SUBMITTED BY**Complete (if applicable)**

Name (Print/Type)	Carmen Santa Maria	Registration No. Attorney/Agent	33,453	Telephone	717-237-5228
Signature	<i>Carmen Santa Maria</i>	Date	January 15, 2004		

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PTO/SB/21 (05-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/071,129
		Filing Date	02/08/2002
		First Named Inventor	GROSSMAN et al.
		Art Unit	1725
		Examiner Name	Lynne Renee Edmondson
Total Number of Pages in This Submission	5	Attorney Docket Number	13DV-13990/11719 (21635-0043)

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission, Issue Fee Transmittal
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	McNees Wallace & Nurick LLC Carmen Santa Maria
Signature	<i>Carmen Santa Maria</i>
Date	January 15, 2004

CERTIFICATE OF MAILING			
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Typed or printed name	Lindsay Vican		
Signature	<i>Lindsay Vican</i>	Date	January 15, 2004

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